

City of Allentown  
Application for  
Seasonal Employment



\*\*\*\*\* **Important Information** \*\*\*\*\*

- To be considered for employment you must be at least 16 years old and a full-time high school or college student returning to school in the fall.
- Applications for lifeguard, playground, and pool workers must be returned to the Recreation Department located at 3000 Parkway Blvd., Allentown, PA, 18104 (610) 437-7757.
- Applications for other seasonal employment must be returned to City Hall, Human Resources, 435 Hamilton Street, Allentown, PA 18101.
- **Working Papers:** If you are 17 years of age or younger, you must obtain a school working certificate. Certificate applications are available for students in the Allentown School District at the District Administration Center, 31 South Penn Street, Allentown, PA (484) 765-4000.
- All seasonal applicants who have contact with children are required to have Act 34 and Act 151 clearances completed prior to employment.
- Act 34 forms are available on the PA State Police website at (<http://www.psp.state.pa.us/psp/cwp>); Act 151 forms are available on PA Department of Public Welfare website at (<http://www.dpw.state.pa.us/ServicesPrograms/ChildWelfare>).

**Please answer all of the following questions completely,** Please type or print legibly.

Date of Application: \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Present Address \_\_\_\_\_  
Number Street State Zip Code

Telephone (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Are you a U.S. Citizen? Yes ☐ No ☐

If no, are you legally eligible to work in the U.S.? Yes ☐ No ☐

*Applicant will be required to provide documentation of identity and employment eligibility prior to starting employment.*

Are you currently a **full-time** student? Yes ☐ No ☐

If yes, please provide the name of the school \_\_\_\_\_

Date of anticipated graduation \_\_\_\_\_

Will you attend school **full-time** in the fall Yes ☐ No ☐

If yes, please provide the name of the school \_\_\_\_\_

Date of anticipated graduation \_\_\_\_\_

Are you at least 16 years of age or older? Yes ☐ No ☐

What is the earliest date that you can begin employment? \_\_\_\_\_

What is the last date that you will be able to work? \_\_\_\_\_

Are there any hours, shifts, or days that you **cannot work**? \_\_\_\_\_

Do you possess a valid driver's license? Yes ☐ No ☐

Driver's license number \_\_\_\_\_ State of Issue \_\_\_\_\_

Operator ☐ Commercial ☐ A ☐ B ☐

Expiration Date \_\_\_\_\_ Endorsements \_\_\_\_\_

Have you ever been convicted of a crime? Yes ☐ No ☐

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation \_\_\_\_\_

*Conviction will not necessarily disqualify you from employment*

Current seasonal positions available:

- |                               |                  |
|-------------------------------|------------------|
| (a) Lifeguard                 | (i) Laborer      |
| (b) Pool Supervisor           | Parks            |
| (c) Pool Worker               | Streets          |
| (d) Playground Monitor        | Traffic Planning |
| (e) Playground Supervisor     | Water Resources  |
| (f) Clerk/Typist              |                  |
| (g) Student Health Technician |                  |
| (h) Engineering Aide          |                  |

Position(s) applied for \_\_\_\_\_

**Note: Laborers must provide their own work clothes and safety shoes.**

Please list any special skills you possess (i.e., Lifeguarding, CPR, First Aid, Tennis instruction, Typing, etc.)

### Work Experience

Please include past City of Allentown Employment

<u>Name of Employer</u>	<u>Name of Supervisor</u>	<u>Employment Dates</u>	<u>Job Title</u>
Address: City, State, Zip Code Phone Number (    )		From: To:	
Reason for leaving (be specific):     			

<u>Name of Employer</u>	<u>Name of Supervisor</u>	<u>Employment Dates</u>	<u>Job Title</u>
Address:		From:	
City, State, Zip Code		To:	
Phone Number (    )			
Reason for leaving (be specific):			

<u>Name of Employer</u>	<u>Name of Supervisor</u>	<u>Employment Dates</u>	<u>Job Title</u>
Address:		From:	
City, State, Zip Code		To:	
Phone Number (    )			
Reason for leaving (be specific):			

Have you ever been dismissed or asked to resign from a position?    Yes ☐    No ☐

If so, please explain: \_\_\_\_\_

May we contact your present employer?    Yes ☐    No ☐

**Please list two references other than relatives, previous employers, or current/former City employees.**

Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Telephone:	Telephone:

Name of person to notify in case of emergency (name, address, telephone number, relationship):

\_\_\_\_\_

The information I have furnished on this application is true and complete. I further understand that if I have made any misrepresentation the City has the absolute right to withdraw any job offer that I have received or to terminate my employment if I began working. I also understand that the City of Allentown may require a random drug test at any time during my employment with the City.

\_\_\_\_\_

**Applicant's Signature**

**Date**

The City of Allentown is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with the City of Allentown depends solely on your qualifications.